Image# 15951415448 PAGE 1 / 13

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

			Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Treasure State PAC			1
ADDRESS (number and street)	3242 Cummins Wa	y	
Check if different			
than previously reported. (ACC)	Missoula		MT 59802
2. FEC IDENTIFICATION	NUMBER ▼	CITY	STATE ▲ ZIP CODE ▲
C C00433680		3. IS THIS NEW (N)	AMENDED (A)
4. TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2) X May 20	(M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On:	Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15		Apr 20 (M4) Jul 20 (M	M7) Oct 20 (M10) Jan 31 (YE)
Quarterly Repor	(c) 12-Day	Primary (12P)	General (12G) Runoff (12R)
Quarterly Repor	t (Q2) PRE-Ele Report fo		Special (12S)
October 15 Quarterly Report	t (Q3)		
January 31 Year-End Report	t (YE)	Election on	in the State of
July 31 Mid-Yea Report (Non-ele Year Only) (MY	ction (d) 30-Day	` '	Runoff (30R) Special (30S)
Termination Rep	Report fo	or the:	/ Y Y Y Y in the
(TER)		Election on	State of
5. Covering Period	04 / 01 / Y	2015 through 0	4 30 2015
I certify that I have examine	this Report and to the	best of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treas	· ·		·
Signature of Treasurer	fick Mckeon	[Electronically Filed]	Date 05 20 2015
NOTE: Submission of false, er	roneous, or incomplete ir	nformation may subject the person sign	ing this Report to the penalties of 2 U.S.C. §437g.
Office			FEC FORM 3X
Use Only			Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Treasure State PAC 04 2015 04 30 2015 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 54196.20 January 1, 2015 (b) Cash on Hand at 57976.42 Beginning of Reporting Period..... 171925.60 20000.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 77976.42 226121.80 6(a) and 6(c) for Column B)..... 15129.45 163274.83 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 62846.97 62846.97 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

_	O	\neg
Treasure	State	PAC

Report Covering the Period: From: 04	01 2015	To: 04 30 2015
I. Receipts	COLUMN A	COLUMN B
<u> </u>	Total This Period	Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	10000.00	43000.00
(i) iternized (use Schedule A)		
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)	10000.00	43000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	10000.00	128000.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		47400000
Totals to Line 33, page 5)▶	20000.00	171000.00
. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
	0.00	0.00
. All Loans Received	0.00	0.00
Loan Repayments Received	0.00	0.00
6. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)	0.00	005.00
(Carry Totals to Line 37, page 5)	0.00	925.60
Refunds of Contributions Made		
to Federal Candidates and Other	0.00	0.00
Political Committees	0.00	0.00
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds	0.00	0.00
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(3.00
(b) Lovin Funda (from Cohadula HE)	0.00	0.00
(b) Levin Funds (from Schedule H5)		5.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(0, 10.1 10.10.00 (1.1 10,0,)	7	7
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	20000.00	171925.60
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	20000.00	171925.60

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements		Disbursements COLUMN A Total This Period		
21. Operating Expenditure	es: ——	iotai iino i enou	Calendar Year-to-Date	
(a) Allocated Federa Activity (from Sch				
	re	0.00	0.00	
		200		
` '	Share	0.00	0.00	
(b) Other Federal Op	-	14629.45	80974.83	
(c) Total Operating E		14025.45	80974.83	
	(ii), and (b))	14629.45	80974.83	
2. Transfers to Affiliated				
Committees		0.00	0.00	
Contributions to Federal Candidates/C				
and Other Political Co		0.00	72000.00	
Independent Expendit		0.00	0.00	
(use Schedule E) 5. Coordinated Party Ex	penditures	0.00	0.00	
(2 U.S.C. §441a(d)) (use Schedule F)		0.00	0.00	
(use seriedule i)		7 7		
6. Loan Repayments Ma	ide	0.00	0.00	
. ,	=			
7. Loans Made		0.00	0.00	
 Refunds of Contribution (a) Individuals/Person 	ns Other		1000.00	
Than Political Co	mmittees	0.00	1000.00	
(b) Dolitical Douby Co	m milita a a	0.00	0.00	
(b) Political Party Co	ommittees	0.00	0.00	
(-)		0.00	0.00	
(000.1 00 17100)		7		
(d) Total Contribution	Refunds			
(add Lines 28(a)	(b), and (c))▶	0.00	1000.00	
9. Other Disbursements		500.00	9300.00	
). Federal Election Activ	ity (0.11.0.0 \$401/00))			
(a) Allocated Federa	• • • • • • • • • • • • • • • • • • • •			
(from Schedule F	•			
		0.00	0.00	
	F			
` '		0.00	0.00	
` '	Activity Paid Entirely	2.22	0.00	
	Funds	0.00	0.00	
	ction Activity (add	0.00	0.00	
Lines 30(a)(i), 3	O(a)(ii) and 3O(b))▶	0.00	0.00	
I. Total Disbursements (add Lines 21(c). 22.			
23, 24, 25, 26, 27, 28		15129.45	163274.83	
	. "		13527100	
2. Total Federal Disburs	ements			
(subtract Line 21(a)(ii	1 1 1 1			
from Line 31)	······	15129.45	163274.83	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	20000.00	171000.00
4. Total Contribution Refunds (from Line 28(d))	0.00	1000.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20000.00	170000.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	14629.45	80974.83
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	925.60
3. Net Operating Expenditures (subtract Line 37 from Line 36)	14629.45	80049.23

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 6 OF 13 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Treasure State PAC Full Name (Last, First, Middle Initial) William Cheney III Date of Receipt Mailing Address 317 Poppy Ave 04 2015 23 City Zip Code State Transaction ID: C10707872 CA Corona Del Mar 92625-3024 Amount of Each Receipt this Period FEC ID number of contributing C 2500.00 federal political committee. Name of Employer Occupation CEO SchoolsFirst Federal Credit Union Receipt For: 2016 Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Barona Band Of Mission Indians Date of Receipt Mailing Address 1095 Barona Rd Attn: Sheila Alvarez 04 10 2015 City State Zip Code Transaction ID: C10665696 CA Lakeside 92040-1541 Amount of Each Receipt this Period FEC ID number of contributing C 2500.00 federal political committee. Name of Employer Occupation Receipt For: 2016 Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Snoqualmie Tribe Date of Receipt Mailing Address P.O. Box 969 M = M 04 10 2015 Attn: Carolyn Lubenau Zip Code City State Transaction ID: C10665695 WA Snoqualmie 98065 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 С federal political committee. Name of Employer Occupation Receipt For: 2016 Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) 10000.00 SUBTOTAL of Receipts This Page (optional)..... 10000.00 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 OF 13 (check only one)					
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b X 11c 12 13 14 15 16 17					
or for commercial purposes, other than using	nd Statements may not be sold or used by any g the name and address of any political committee.	person for the purpose of soliciting contributions tee to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) Treasure State PAC							
Full Name (Last, First, Middle Initial) A. Allstate Insurance Co PAC	NUTS AS	Date of Receipt					
Mailing Address 2775 SANDERS ROAD S	BUITE A5	04 23 _ 2015 _					
City NORTHBROOK	State Zip Code IL 60062	Transaction ID : C10707873					
FEC ID number of contributing federal political committee.	C C00040253	Amount of Each Receipt this Period 2000.00					
Name of Employer	Occupation						
Receipt For: 2016 Primary General	Aggregate Year-to-Date ▼	_					
Other (specify) ▼	2000.00						
Full Name (Last, First, Middle Initial) BLUEPAC - BLUE CROSS BLU Mailing Address 1949 9 STREET NAME Mailing Address 1949 9 STREET NAME	E SHIELD ASSOCIATION PAC	Date of Receipt					
Mailing Address 1310 G STREET NW		04 23 2015					
City	State Zip Code DC 20005	Transaction ID : C10707871					
WASHINGTON FEC ID number of contributing		Amount of Each Receipt this Period					
federal political committee.	C C00194746	2500.00					
Name of Employer	Occupation						
Receipt For: 2016	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	5000.00						
Full Name (Last, First, Middle Initial) C. Facebook Inc PAC (FBPAC)	·	Date of Receipt					
Mailing Address 1155 F ST NW SUITE 475		04 10 2015					
City Washington	State Zip Code DC 20004	Transaction ID : C10665697 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C C00502906	2500.00					
Name of Employer	Occupation						
Receipt For: 2016 ✓ Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00						
SUBTOTAL of Receipts This Page (optional	l)	7000.00					
TOTAL This Period (last page this line num	nber only)						

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 OF 13 (check only one) 11a 11b X 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Treasure State PAC			
Full Name (Last, First, Middle Initial) A. GENERAL ELECTRIC CO POLITICA Mailing Address 1299 Pennsylvania Ave NW Ste 900 City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2016 Primary Other (specify) General Other (specify)	State DC Coo	Zip Code 20004-2414 0024869	Date of Receipt 04 26 2015 Transaction ID : C10708313 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) B. National Association of Broadcaster Mailing Address 1771 N Street NW City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2016 Primary Other (specify) General Other (specify)	State DC Coo	Zip Code 20036 0009985	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) C. Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) Other (specify)	State C Occupation Aggregate	Zip Code Year-to-Date ▼	Date of Receipt Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)		·····	3000.00

TOTAL This Period (last page this line number only).....

10000.00

ľ

S	CHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 9		
IT	EMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(check on	(oncor only onc)	
		Detailed Summary Page	X 21b	22 23 28b 28b	24 25 26 28c 29 30b
Δ,	ny information copied from such Reports and Staten	nents may not be sold or u			
	for commercial purposes, other than using the nam				
\setminus	NAME OF COMMITTEE (In Full)				
$ \rangle$	Treasure State PAC				
\angle	Full Name (Last, First, Middle Initial)			T	
Α.				Date of Disbursem	ent
				M M / D D	/ Y Y Y Y
	Mailing Address 3242 Cummins Way			04 02	2015
	City	State Zip Code			
	Missoula	MT 59802-3222		Transaction ID :	D759342
	Purpose of Disbursement Accounting fee				
	Candidate Name			Amount of Each D	isbursement this Period
	Candidate Ivanie		Category/ Type		3000.00
	Office Sought: House Disbursen	nent For: 2016	1,750		
		Primary General			
	President	Other (specify) ▼			
_	State: District: Full Name (Last, First, Middle Initial)				
В.				Date of Disbursem	ent
-				M M / D D	
	Mailing Address 303 Massachusetts Avenue, NE Ste 207			04 28	2015
	,	State Zip Code DC 20002		Transaction ID :	D759345
	Washington Purpose of Disbursement	DC 20002		-	
	PAC Fundraising consultant			Amount of Each D	isbursement this Period
	Candidate Name		Category/		10000.00
	Office Sought: House Bishurses	nont For: 0040	Type		1000.00
		nent For: 2016 Primary General			
	President	Other (specify)			
	State: District:				
_	Full Name (Last, First, Middle Initial)				
C.	NGP VAN, Inc.			Date of Disbursem	
	Mailing Address 1225 Eye St NW, Suite 1225			04 06	2015
	•	State Zip Code DC 20005		Transaction ID :	D759334
	Washington Purpose of Disbursement	DC 20005		-	
	Computer Software			Amount of Each D	isbursement this Period
	Candidate Name		Category/		300.00
	Office Sought: House Disbursen	nont For: 0040	Type		300.00
	Office Sought: House Disbursen Senate	nent For: 2016 Primary General			
	President	Other (specify)			
_	State: District:				
Г	·				10000.00
5	SUBTOTAL of Disbursements This Page (optional)		······································		13300.00
Γ,	OTAL This Period (last page this line number only)				
1'	VIAL THIS FEHOU (last page this line number only)				

S ľ

S	SCHEDULE B (FEC Form 3X)			LINE NUMBER: PAGE 10 OF 13					13				
IT	EMIZED DISBURSEMENTS	Use separate schedule(s for each category of the		(check	only	one)		00		10. [_ 		
		Detailed Summary Page		X 2	21b 27	22	Ш	23 28h		24 28c	25		26
·						28a		28b			29		30b
	ly information copied from such Reports and Staten for commercial purposes, other than using the nam												i
\setminus	NAME OF COMMITTEE (In Full)												
	Treasure State PAC												
_	Full Name (Last, First, Middle Initial)												
Α.	MasterCard					Date of	f Dis	burse			Y	Y	
	Mailing Address PO Box 31021					04	ı.	0	1	L.	2015		
	City	State Zip Code				Trans	acti	on ID	· D.	759339			
	Tampa	FL 33631-3021				ITAIIS	acti	טוו ווט		33333			
	Purpose of Disbursement Credit card payment(vendors that aggregate over \$	200 listed below)	Г		1	Amoun	t of	Each	Disl	burseme	ent this	Perio	od
	Candidate Name			Category/ Type				,		7		6.50	
	Office Sought: House Disbursen	nent For: 2016											
		Primary General											
	President	Other (specify) ▼											
_	State: District:												
B	Full Name (Last, First, Middle Initial)					Date of	f Dic	hurco	mor	at			
υ.	MasterCard					Date 0	015				V V	V	
	Mailing Address PO Box 31021					04		0	- 1	/ Y	2015	Y	
	City S	State Zip Code			+	Tronc	. ooti	on ID	· D.	759340			
	Tampa	FL 33631-3021				Halls	acu	טוו ווט	. ט	139340			
	Purpose of Disbursement Credit card payment(vendors that aggregate over \$	200 listed below)	Ιг		1	Amoun	t of	Each	Disl	burseme	ent this	Perio	od
	Candidate Name			Category/ Type	7				Ī	-	19	0.00	٦
	Office Sought: House Disbursen	nent For: 2016		.,,,,				,		,			
		Primary General											
	President	Other (specify) ▼											
	State: District:												
	Full Name (Last, First, Middle Initial)												
C.	MasterCard					Date of	t Dis	burse	mer				
	Mailing Address PO Box 31021					04	/	0		/ Y	2015	Υ	
	Walling Address PO Box 31021					04		Ū	_		2013		
	City	State Zip Code				Trons	ooti	on ID	· D.	759341			
	Tampa	FL 33631-3021				Trans	sacti	טו וט	. ט	759341			
	Purpose of Disbursement Credit card payment(vendors that aggregate over \$	200 listed helow)	lг		7								
	Candidate Name		4 L		4	Amoun	t of	Each	Dist	burseme	ent this	Perio	d
	Candidate Name			Category/ Type	/						106	5.08	П
	Office Sought: House Disbursen	nent For: 2016	1	Type	\dashv			7		7			_
		Primary General											
		Other (specify) ▼											
_	State: District:	· 											
	'						_	-	-			_	$\overline{\neg}$
s	UBTOTAL of Disbursements This Page (optional))				,		,	126	1.58	
H					_			-					Ī
T	OTAL This Period (last page this line number only))	•			,		7		-	

S ľ

SCHEDULE B (FEC Form 3X) FOR LINE NUMBER:			PAGE 11 OF 13	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	1 '	(check only one)	
	Detailed Summary Page	X 21b	22 28a	23 24 25 26 28b 28c 29 30b
Any information copied from such Reports and State	ments may not be sold or us			
or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				
│ Treasure State PAC				
Full Name (Last, First, Middle Initial)				
A. Delta Air			Date of Dis	bursement
Mailing Address PO Box 20706			04 /	01 2015
Mailing Address PO Box 20706			04	01 2013
City	State Zip Code		Transactio	on ID : D759331
Atlanta Purpose of Disbursement	GA 30320-6001		Transaoti	. 5700001
Airfare			Amount of I	Each Disbursement this Period
Candidate Name		Category/		504.00
		Туре		584.60
Office Sought: House Disburse Senate	ement For: 2016 Primary General		[MEMO ITE	M]
President	Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial)				
B. Delta Air			Date of Dis	
Mailing Address PO Box 20706			04	01 2015
City	State Zip Code		Tuanaati	ID - D750222
Atlanta	GA 30320-6001		Transacti	on ID : D759332
Purpose of Disbursement Airfare			Amount of I	Each Disbursement this Period
Candidate Name		Category/		
		Type		49.00
	ement For: 2016 Primary General		[MEMO ITE	M]
President	Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial)				
C. Holiday Inn Helena			Date of Dis	
Mailing Address 22 N Last Chance Gulch			04	01 2015
0"				
City Helena	State Zip Code MT 59601		Transacti	on ID : D759338
Purpose of Disbursement				
Lodging Candidate Name			Amount of I	Each Disbursement this Period
Candidate Name		Category/ Type		399.24
Office Sought: House Disburse	ement For: 2016	.,,,,	[MEMO ITE	MI
Senate	Primary General		•	•
State: District:	Other (specify) ▼			
Side. District.				
SUBTOTAL of Disbursements This Page (optional)				0.00
TOTAL This Period (last page this line number only	y)			, , , , , , , , , , , , , , , , , , , ,

ľ

		FOR LINE I	NUMBER.	PAGE 12 OF 13
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)		
	Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 28c 29 30b
Any information conicd from such Departs and State	monto mou not be cold or			
Any information copied from such Reports and State or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full)				
Treasure State PAC				
Full Name (Last, First, Middle Initial)				
- Campaign Compliance, Inc.			Date of Disburser	
Mailing Address 3242 Cummins Way			04 02	
	State Zip Code		Transaction ID :	D759343
Missoula Purpose of Disbursement	MT 59802-3222		าานกรสนิบเทาป .	D. 00070
Reimbursement(Vendors that aggregate over \$200	listed below)		Amount of Each [Disbursement this Period
Candidate Name		Category/ Type		67.87
	ment For: 2016	-		
Senate	Primary General			
State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
3.			Date of Disburser	nent
			M M / D I) / Y Y Y Y Y
Mailing Address				
City	State Zip Code			
Purpose of Disbursement			Amount of Fact	Dishuraament this Desired
Candidate Name			Amount of Each I	Disbursement this Period
		Category/ Type		
Office Sought: House Disburse	ment For:			
Senate	Primary General			
President State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
).			Date of Disburser	nent
Mailing Address			M M / D I	/
	State Zip Code			
•	2.p 0000			
Purpose of Disbursement			Amount of Each	Disbursement this Period
Candidate Name		Category/ Type	Amount of Lacif L	DISDUISEMENT THIS PENOU
Office Sought: House Disburse	ment For:	,,,		
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
State. District.				
<u>'</u>				67.87
SUBTOTAL of Disbursements This Page (optional)		······•		67.87

SCHEDULE B (FEC Form 3X)		EOD LINE	LINE NUMBER: PAGE 13 OF 13				
TEMIZED DISBURSEMENTS	Use separate schedule(s) (check only		NOMBER:				
LIMILLE DIODONOLIVILIANO	for each category of the Detailed Summary Page	21b	22 23 24 25 26				
		27	28a 28b 28c X 29 30				
Any information copied from such Reports and Statem							
or for commercial purposes, other than using the name	e and address of any politic	al committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)							
Full Name (Last, First, Middle Initial)							
Yellowstone County Democratic Co	entral Com		Date of Disbursement				
			M M / D D / Y Y Y Y				
Mailing Address 625 Yellowstone Avenue			04 09 2015				
City	State Zip Code						
	MT 59101		Transaction ID : D759346				
Purpose of Disbursement							
Nonfederal contribution		L II	Amount of Each Disbursement this Period				
Candidate Name		Category/	500.00				
Office Sought: House Distance	aont For: 0040	Туре	555.50				
	nent For: 2016 Primary General						
	Other (specify)						
State: District:	• • • • •						
Full Name (Last, First, Middle Initial)							
3.			Date of Disbursement				
Martin and Address			M = M / D = D / Y = Y = Y				
Mailing Address							
City	State Zip Code						
•							
Purpose of Disbursement			Amount of Foot Bishows would this Borist				
Candidate Name			Amount of Each Disbursement this Period				
Carlandate Hame		Category/ Type					
Office Sought: House Disbursen	nent For:	.,,,,,	,				
	Primary General						
	Other (specify) ▼						
State: District:							
Full Name (Last, First, Middle Initial)			Date of Disbursement				
•			M M / D D / Y Y Y Y				
Mailing Address							
City	State Zip Code						
Ony C	Zip Oude						
Purpose of Disbursement							
			Amount of Each Disbursement this Period				
Candidate Name		Category/					
Office Sought: House Disbursen	nent For:	Туре					
	Primary General						
	Other (specify) ▼						
State: District:							
·							
$\textbf{SUBTOTAL} \ \ \text{of Disbursements This Page (optional)}$			500.00				
			500.00				
TOTAL This Period (last page this line number only).			300.00				